

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Heartland Values PAC

ADDRESS (number and street)

PO Box 505

☐Check if different
than previously
reported. (ACC)

Sioux Falls

SD

57101

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00409003

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☒April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2010

through

03

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Barb Buell, Deputy Treasurer

Signature of Treasurer

Electronically Filed by Barb Buell, Deputy Treasurer

Date

04

14

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 31

Write or Type Committee Name
Heartland Values PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	140635.41
(b) Cash on Hand at Beginning of Reporting Period	140635.41	
(c) Total Receipts (from Line 19)	63676.34	63676.34
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	204311.75	204311.75
7. Total Disbursements (from Line 31)	100620.64	100620.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	103691.11	103691.11
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 31

Write or Type Committee Name

Heartland Values PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	17000.00	17000.00
(ii) Unitemized	675.00	675.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	17675.00	17675.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	46000.00	46000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	63675.00	63675.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1.34	1.34
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	63676.34	63676.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	63676.34	63676.34

DETAILED SUMMARY PAGE

of Disbursements

4 / 31

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	60620.64	60620.64	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	60620.64	60620.64	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40000.00	40000.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	100620.64	100620.64	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	100620.64	100620.64	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 31

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	63675.00	63675.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	63675.00	63675.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	60620.64	60620.64
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	60620.64	60620.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)

Erik L Winborn

Mailing Address 9706 Rambling Ridge Ct

City

Fairfax Station

State

VA

Zip Code

22039-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
Winborn Solutions LLC

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: AB747AEDC4559480FBA0

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Jeffery M Walter

Mailing Address 2001 Summit Terrace

City

Alexandria

State

VA

Zip Code

22307-1148

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Walter Group

Occupation
Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: AEF8B569BB138457BB86

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Gregory W Wendt

Mailing Address 1 Muir Loop

City

San Francisco

State

CA

Zip Code

94129-1123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capital Global

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: A135EB210B1C9442CA72

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)

Vera Langs

Mailing Address 25332 Gallup Cir

City

Laguna Hills

State

CA

Zip Code

92653-6126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: AEBD237D325EB4939964

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Lisa Wendt

Mailing Address 1 Muir Loop

City

San Francisco

State

CA

Zip Code

94129-1123

FEC ID number of contributing
federal political committee.

C

Name of Employer
WR Hambrecht Co

Occupation

Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: A3E7F87FBD2A440719EC

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Dan Kirby

Mailing Address 2 S Riverview Heights

City

Sioux Falls

State

SD

Zip Code

57105-0254

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kirby Financial Llc

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 1 0

Transaction ID: AB02B3DE725C2462EAAF

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

17000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)

Federal Express PAC

Mailing Address 101 Constitution Ave NW Ste 801

City

Washington

State

DC

Zip Code

20001-2133

FEC ID number of contributing
federal political committee.

C

C00068692

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 1 0

Transaction ID: A19EAD406728340D7B98

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Home Depot Inc PAC

Mailing Address 101 Constitution Ave NW Ste 800W

City

Washington

State

DC

Zip Code

20001-2127

FEC ID number of contributing
federal political committee.

C

C00284885

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 1 0

Transaction ID: A277DC57A73B94D37BF2

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

General Electric Company PAC

Mailing Address 1299 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C

C00024869

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: A400D6F52A6674B2E8F4

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 31

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)

American Hospital Association PAC

Mailing Address 325 7th St NW Ste 700
Liberty Place

City	State	Zip Code
Washington	DC	20004-2801

FEC ID number of contributing
federal political committee.**C** C00106146

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	1	0

Transaction ID: A1A8B60650D374BA489C

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Automotive Free International Trade PAC

Mailing Address 1625 Prince St Ste 225

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing
federal political committee.**C** C00250399

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	0

Transaction ID: AB27AAF8BBAFD47BCB68

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Physician Hospitals of America PAC

Mailing Address 2600 S Minnesota Ave Ste 202

City	State	Zip Code
Sioux Falls	SD	57105-4731

FEC ID number of contributing
federal political committee.**C** C00394163

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	9	/	2	0	1	0

Transaction ID: A942F5DF30A034E8CA3A

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)

Florida Power & Light Co Employees

Mailing Address PO Box 14000

City

Juno Beach

State

FL

Zip Code

33408

FEC ID number of contributing
federal political committee.

C

C00064774

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: A87751C45F4B648F2B85

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Koch Industries PAC

Mailing Address 600 14th St NW Ste 800

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

C00236489

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: A91F1C952883E48FA81B

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Associated Builders & Contractors PAC

Mailing Address 4250 Fairfax Dr Flr 9

City

Arlington

State

VA

Zip Code

22203-1665

FEC ID number of contributing
federal political committee.

C

C00010421

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: AE323037E34C7484B859

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)

CME Group Inc PAC

Mailing Address 701 Pennsylvania Ave NW Plaza Ste

City

Washington

State

DC

Zip Code

20004-7408

FEC ID number of contributing
federal political committee.

C

C00076299

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: A1744892F4927432595A

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Lockheed Martin Corp Employees PAC

Mailing Address 1550 Crystal Dr Ste 300

City

Arlington

State

VA

Zip Code

22202

FEC ID number of contributing
federal political committee.

C

C00303024

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: AD3C0337E45684DA4B69

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

US Oncology Inc Good Government Committee

Mailing Address 700 13th St NW Ste 525

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

C00339655

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: A6260C2B67461423BA63

Amount of Each Receipt this Period

650.00

In-kind: In-Kind Goods &
Services

SUBTOTAL of Receipts This Page (optional)

8150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 31

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)

US Oncology Inc Good Government Committee

Mailing Address 700 13th St NW Ste 525

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.**C**

C00339655

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	0

Transaction ID: A66672E5E1CB44970A12

Amount of Each Receipt this Period

4350.00

B.

Full Name (Last, First, Middle Initial)

Blue Cross/Blue Shield of California

Mailing Address 1215 K St Ste 2010

City

Sacramento

State

CA

Zip Code

95814

FEC ID number of contributing
federal political committee.**C**

C00340364

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	0

Transaction ID: A54AE9B4B6F724CB1963

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Federal Express PAC

Mailing Address 101 Constitution Ave NW Ste 801

City

Washington

State

DC

Zip Code

20001-2133

FEC ID number of contributing
federal political committee.**C**

C00068692

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	0

Transaction ID: AE6F21C2E461648ED91B

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

7850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 31

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)

Northrop Grumman PAC

Mailing Address 1000 Wilson Blvd Ste 2300

City

Arlington

State

VA

Zip Code

22209

FEC ID number of contributing
federal political committee.**C**

C00088591

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	0

Transaction ID: A155E0617EAF14342B61

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

46000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) US Oncology Inc Good Government Committee	Transaction ID: B6260C2B67461423BA63 Date of Disbursement
Mailing Address 700 13th St NW Ste 525	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 9 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
Purpose of Disbursement In-kind: In-Kind Goods & Services Candidate Name US Oncology Inc Good Government Committee	<div> <div>650.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
B. Full Name (Last, First, Middle Initial) Justin Brasell	Transaction ID: B721C83A1BC4F42CCB41 Date of Disbursement
Mailing Address 200 N Phillips Ave Ste L101	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 4 / 2 0 1 0</div> </div>
City Sioux Falls State SD Zip Code 57104-6059	Amount of Each Disbursement this Period
Purpose of Disbursement PAC Campaign Manager Candidate Name	<div> <div>8000.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
C. Full Name (Last, First, Middle Initial) Click Rain	Transaction ID: B9E180DCC76FF4350B78 Date of Disbursement
Mailing Address 401 E 8th St Ste 220	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 4 / 2 0 1 0</div> </div>
City Sioux Falls State SD Zip Code 57103-7008	Amount of Each Disbursement this Period
Purpose of Disbursement PAC Website Fees Candidate Name	<div> <div>1325.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
SUBTOTAL of Disbursements This Page (optional)	<div>9975.00</div>
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Murphy Goldammer & Prendergast Llp</p> <p>Mailing Address PO Box 1728</p> <p>City Sioux Falls State SD Zip Code 57101-1728</p> <p>Purpose of Disbursement Legal Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B701A8016C58B445D9A8</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="425.59"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Dane M Bloch</p> <p>Mailing Address 601 E 69th St Apt 129</p> <p>City Sioux Falls State SD Zip Code 57108-2405</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC78D91DCA87D47CAB46</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="433.75"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Barb Buell</p> <p>Mailing Address PO Box 505</p> <p>City Sioux Falls State SD Zip Code 57101-0505</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5A5D1FE621334F16874</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="269.36"/></p>

SUBTOTAL of Disbursements This Page (optional)

1128.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: B1576F4A248034339988 Date of Disbursement																				
Mailing Address PO Box 660351	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	1	0												
City Ogden State UT Zip Code 84201-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Taxes Candidate Name	<table border="1"> <tr> <td colspan="10">625.04</td> </tr> </table>	625.04																			
625.04																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) The LS Group	Transaction ID: B85D547D7FEE94EEEB35 Date of Disbursement																				
Mailing Address 912 F St NW Apt 1106	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	1		2	0	1	0												
City Washington State DC Zip Code 20004-1451	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Fundraising Consultant Candidate Name	<table border="1"> <tr> <td colspan="10">6900.00</td> </tr> </table>	6900.00																			
6900.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) South Dakota Unemployment Insurance	Transaction ID: B7F38A0A396A646C4A89 Date of Disbursement																				
Mailing Address PO Box 4730	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	7		2	0	1	0												
City Aberdeen State SD Zip Code 57402-4730	Amount of Each Disbursement this Period																				
Purpose of Disbursement Unemployment Insurance Candidate Name	<table border="1"> <tr> <td colspan="10">208.75</td> </tr> </table>	208.75																			
208.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

7733.79

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)
United States Treasury

Mailing Address PO Box 660351

City State Zip Code
Ogden UT 84201-0001

Purpose of Disbursement
Payroll Taxes
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BC5E1BAB25B0845F0961
Date of Disbursement

/ /

Amount of Each Disbursement this Period

173.00

B.

Full Name (Last, First, Middle Initial)
Angel R Paulson

Mailing Address 200 N Phillips Ave Ste L101

City State Zip Code
Sioux Falls SD 57104-6059

Purpose of Disbursement
Payroll
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B79EC12D33AE4417BAA0
Date of Disbursement

/ /

Amount of Each Disbursement this Period

369.40

C.

Full Name (Last, First, Middle Initial)
Barb Buell

Mailing Address PO Box 505

City State Zip Code
Sioux Falls SD 57101-0505

Purpose of Disbursement
Payroll
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BC39BF1006B4A4E95860
Date of Disbursement

/ /

Amount of Each Disbursement this Period

269.35

SUBTOTAL of Disbursements This Page (optional)

811.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) Dane M Bloch	Transaction ID: BBE0846F5589D4482B6C Date of Disbursement																				
Mailing Address 601 E 69th St Apt 129	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	9		2	0	1	0												
City State Zip Code Sioux Falls SD 57108-2405	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">433.75</td> </tr> </table>	433.75																			
433.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Justin Brasell	Transaction ID: B5D20D71B369748049D4 Date of Disbursement																				
Mailing Address 200 N Phillips Ave Ste L101	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	1	0												
City State Zip Code Sioux Falls SD 57104-6059	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Campaign Manager Candidate Name	<table border="1"> <tr> <td colspan="10">8000.00</td> </tr> </table>	8000.00																			
8000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Click Rain	Transaction ID: B04C9E236D2984F12B23 Date of Disbursement																				
Mailing Address 401 E 8th St Ste 220	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	8		2	0	1	0												
City State Zip Code Sioux Falls SD 57103-7008	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Website Fees Candidate Name	<table border="1"> <tr> <td colspan="10">1060.00</td> </tr> </table>	1060.00																			
1060.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

9493.75

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) Barb Buell Mailing Address PO Box 505	Transaction ID: BF5BB02787C0E466594B Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 2 / 2 0 1 0</div> </div>
City State Zip Code Sioux Falls SD 57101-0505 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>269.36</div>
B. Full Name (Last, First, Middle Initial) Dane M Bloch Mailing Address 601 E 69th St Apt 129 City State Zip Code Sioux Falls SD 57108-2405 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BC157DA830F5E441A97A Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 2 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>433.75</div>
C. Full Name (Last, First, Middle Initial) Angel R Paulson Mailing Address 200 N Phillips Ave Ste L101 City State Zip Code Sioux Falls SD 57104-6059 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B7B58DF7C35D94254B57 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 2 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>1582.00</div>

SUBTOTAL of Disbursements This Page (optional)

2285.11

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: B2F999D8E2DA14E2E9AA Date of Disbursement																				
Mailing Address PO Box 660351	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	6		2	0	1	0												
City Ogden State UT Zip Code 84201-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Taxes Candidate Name	<table border="1"> <tr> <td colspan="10">359.46</td> </tr> </table>	359.46																			
359.46																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Commerce Center Partners	Transaction ID: B05D445EA994F489EAD3 Date of Disbursement																				
Mailing Address 230 S Phillips Ave Ste 202	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	4		2	0	1	0												
City Sioux Falls State SD Zip Code 57104	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Office Rent Candidate Name	<table border="1"> <tr> <td colspan="10">96.20</td> </tr> </table>	96.20																			
96.20																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Barb Buell	Transaction ID: B4023CC00AEA94380A24 Date of Disbursement																				
Mailing Address PO Box 505	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	6		2	0	1	0												
City Sioux Falls State SD Zip Code 57101-0505	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">269.36</td> </tr> </table>	269.36																			
269.36																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

725.02

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) Dane M Bloch	Transaction ID: BA143808CA4D34ECB949 Date of Disbursement																				
Mailing Address 601 E 69th St Apt 129	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	6		2	0	1	0												
City State Zip Code Sioux Falls SD 57108-2405	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">433.75</td> </tr> </table>	433.75																			
433.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Angel R Paulson	Transaction ID: B3CDF38C51C2B46FC92F Date of Disbursement																				
Mailing Address 200 N Phillips Ave Ste L101	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	6		2	0	1	0												
City State Zip Code Sioux Falls SD 57104-6059	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">688.80</td> </tr> </table>	688.80																			
688.80																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Justin Brasell	Transaction ID: B014D6E38BB984CBD87B Date of Disbursement																				
Mailing Address 200 N Phillips Ave Ste L101	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	2		2	0	1	0												
City State Zip Code Sioux Falls SD 57104-6059	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Campaign Manager Candidate Name	<table border="1"> <tr> <td colspan="10">8000.00</td> </tr> </table>	8000.00																			
8000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

9122.55

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
Heartland Values PAC

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) Angel R Paulson	Transaction ID: BBC326AE380CA4EF9A78 Date of Disbursement																				
Mailing Address 200 N Phillips Ave Ste L101	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City State Zip Code Sioux Falls SD 57104-6059	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">369.40</td> </tr> </table>	369.40																			
369.40																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Barb Buell	Transaction ID: BA380D513622D41CBAC5 Date of Disbursement																				
Mailing Address PO Box 505	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City State Zip Code Sioux Falls SD 57101-0505	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">269.35</td> </tr> </table>	269.35																			
269.35																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: BEF92C24CA36E400D985 Date of Disbursement																				
Mailing Address PO Box 660351	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City State Zip Code Ogden UT 84201-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Taxes	<table border="1"> <tr> <td colspan="10">1041.64</td> </tr> </table>	1041.64																			
1041.64																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1680.39

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) Angel R Paulson	Transaction ID: B6EBDE20DA28D45F6B8D Date of Disbursement																				
Mailing Address 200 N Phillips Ave Ste L101	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	1	0												
City State Zip Code Sioux Falls SD 57104-6059	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">369.40</td> </tr> </table>	369.40																			
369.40																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Dane M Bloch	Transaction ID: BD52BA4007BB14C26973 Date of Disbursement																				
Mailing Address 601 E 69th St Apt 129	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	1	0												
City State Zip Code Sioux Falls SD 57108-2405	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">433.75</td> </tr> </table>	433.75																			
433.75																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Barb Buell	Transaction ID: B8224E9201E534454B4F Date of Disbursement																				
Mailing Address PO Box 505	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	1	0												
City State Zip Code Sioux Falls SD 57101-0505	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll	<table border="1"> <tr> <td colspan="10">269.36</td> </tr> </table>	269.36																			
269.36																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1072.51

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360002	Transaction ID: B2FF4352E531847C78B1 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 4 / 2 0 1 0</div> </div>
City State Zip Code Fort Lauderdale FL 33336-0002 Purpose of Disbursement Credit Card: See Below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1251.38</div> <div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) Capital Grille Mailing Address 601 Pennsylvania Ave NW City State Zip Code Washington DC 20002 Purpose of Disbursement PAC Event Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BA4B2D2298855410DA9E Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 4 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>321.95</div> <div>Category/Type</div> <p>[MEMO ITEM]</p>
C. Full Name (Last, First, Middle Initial) Landini Brothers Inc Mailing Address 115 King St City State Zip Code Alexandria VA 22314 Purpose of Disbursement PAC Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BCA19E73F1D9F4BFCB24 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 4 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>270.38</div> <div>Category/Type</div> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

1251.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) Aristotle International Inc	Transaction ID: B1E5239AB2EC64A36A47 Date of Disbursement																				
Mailing Address 205 Pennsylvania Ave SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	4		2	0	1	0												
City Washington State DC Zip Code 20003-1182	Amount of Each Disbursement this Period																				
Purpose of Disbursement Software Support Candidate Name	<table border="1"> <tr> <td colspan="10">510.00</td> </tr> </table>	510.00																			
510.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) American Express	Transaction ID: BEC192311ABCF4939949 Date of Disbursement																				
Mailing Address PO Box 360002	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	4		2	0	1	0												
City Fort Lauderdale State FL Zip Code 33336-0002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card: See Below Candidate Name	<table border="1"> <tr> <td colspan="10">3645.72</td> </tr> </table>	3645.72																			
3645.72																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
C. Full Name (Last, First, Middle Initial) Delta Air Lines Inc	Transaction ID: B7FF8577E382944008C4 Date of Disbursement																				
Mailing Address 1030 Delta Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	4		2	0	1	0												
City Atlanta State GA Zip Code 30354-1989	Amount of Each Disbursement this Period																				
Purpose of Disbursement Airline Travel Candidate Name	<table border="1"> <tr> <td colspan="10">1700.30</td> </tr> </table>	1700.30																			
1700.30																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				

SUBTOTAL of Disbursements This Page (optional)

3645.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Us Airways</p> <p>Mailing Address 111 W Rio Salado Pkwy</p> <p>City Tempe State AZ Zip Code 85281-2880</p> <p>Purpose of Disbursement Airline Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B9A93ED7BDC084EE1984</p> <p>Date of Disbursement <div> <div>02</div> <div>24</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>1867.40</div> </p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 360002</p> <p>City Fort Lauderdale State FL Zip Code 33336-0002</p> <p>Purpose of Disbursement Credit Card: See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC09C9AA5E59C424A81D</p> <p>Date of Disbursement <div> <div>02</div> <div>08</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>4155.87</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Delta Air Lines Inc</p> <p>Mailing Address 1030 Delta Blvd</p> <p>City Atlanta State GA Zip Code 30354-1989</p> <p>Purpose of Disbursement Airline Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1B5DF6CB21C24A6BAF5</p> <p>Date of Disbursement <div> <div>02</div> <div>08</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>893.90</div> </p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

4155.87

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Us Airways</p> <p>Mailing Address 111 W Rio Salado Pkwy</p> <p>City Tempe State AZ Zip Code 85281-2880</p> <p>Purpose of Disbursement Airline Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B4A0E225A78704F3D805</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 8 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>625.70</div> </p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) LaPlaya Beach Restaurant</p> <p>Mailing Address 9891 Gulf Shore Dr</p> <p>City Naples State FL Zip Code 34108</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF9A41E72F12B499490C</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 8 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>238.14</div> </p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Northwest Airlines</p> <p>Mailing Address 7500 Airline Dr</p> <p>City Minneapolis State MN Zip Code 55450-1101</p> <p>Purpose of Disbursement Airline Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BFCE1D4A2CF864CE5804</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 8 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>1982.80</div> </p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► <div>0.00</div></p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)
Kirk for Senate

Mailing Address PO Box 8

City Winnetka State IL Zip Code 60093

Purpose of Disbursement
Contribution

Candidate Name
Rep. Mark Steven Kirk

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 10

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: B9A406CB7D5E04CEF9A8

Date of Disbursement

^M ^M / ^D ^D / ^Y ^Y ^Y ^Y

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

59639.98

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) National Republican Senate Committee	Transaction ID: B1C0CAD293E28431FACA Date of Disbursement
Mailing Address 425 2nd St NE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 3 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20002-4914	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name <div>Category/Type</div>	<div>15000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
B. Full Name (Last, First, Middle Initial) Scott Brown for US Senate	Transaction ID: BAC3F5427285E4862AC7 Date of Disbursement
Mailing Address 200 Reservoir Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 2 / 2 0 1 0</div> </div>
City Needham State MA Zip Code 02494	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name Scott P Brown <div>Category/Type</div>	<div>5000.00</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MA District:	
C. Full Name (Last, First, Middle Initial) Friends of John McCain	Transaction ID: BFE8B90B7170D4BAF819 Date of Disbursement
Mailing Address 211 N Union Street Ste 200	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 3 / 2 0 1 0</div> </div>
City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name Sen. John McCain <div>Category/Type</div>	<div>5000.00</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AZ District:	
SUBTOTAL of Disbursements This Page (optional)	<div>25000.00</div>
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) Hoeven Victory Committee	Transaction ID: BB6C9383338474A3499C Date of Disbursement																				
Mailing Address PO Box 365	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	6		2	0	1	0												
City McLean State VI Zip Code 22101	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name John Hoeven Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District:	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Hoeven Victory Committee	Transaction ID: BC099F85A4A2C442C86E Date of Disbursement																				
Mailing Address PO Box 365	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	6		2	0	1	0												
City McLean State VI Zip Code 22101	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name John Hoeven Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District:	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) Friends of Roy Blunt	Transaction ID: BAA1E441D96B84C6CB0F Date of Disbursement																				
Mailing Address PO Box 50100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City Springfield State MO Zip Code 65805	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name Rep. Roy Blunt Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td colspan="10">15000.00</td> </tr> </table>	15000.00																			
15000.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td colspan="10">40000.00</td> </tr> </table>	40000.00																			
40000.00																					